## IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF MARYLAND

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MC1-H *		RECERNED
18601 Roxbany RD	MAY 2 4 2	
Hageston MD 21746	OLERK U.S. DISTRIC DISTRICT OF MAR	NRE CT COURT TYLAND DEPUTY
*  (Full name, date of birth, identification #, address of petitioner)  Plaintiff,		
v. Case No.		
Off-Sauders *	(Leave blank. To be fill	ed in by Court.)
Off Crites		
of MCTC PHSan		
(Full name and address of respondent)  Defendant(s).		
COMPLAINT		
1. Previous Lawsuits		
A. Have you filed other cases in state or federal court dealing w case or against the same defendants?	ith the same fac	ts as in this
YES D NO D		
B. If you answered YES, describe that case(s) in the spaces below	w.	
1. Parties to the other case(s):		
Plaintiff:		
Defendant(s):		
2. Court (if a federal court name the district; if a state court r	name the city or c	county):

- Do not file any motions or memoranda that are longer than thirty-five (35) pages unless you have received permission from the Court. Most motions and memoranda should be much shorter than thirty-five pages.
- You do not have to file copies of exhibits that are already on file in the same case. For example, if the defendants in your case file a motion for summary judgment and attach as an exhibit to their motion a copy of a sick call slip, you do not have to attach a copy of that document to your opposition or to any motions you file. You may simply refer to the copy that is already in the file.
- You must sign every pleading, motion, and memorandum that you file. You MAY NOT sign someone else's name, nor may you file anything on behalf of someone else. In order for a pleading, motion, or memorandum to be considered on behalf of more than one plaintiff, each plaintiff must sign it.

3. Case No.:	
4. Date filed:	
5. Name of judge that handled the case:	
6. Disposition (won, dismissed, still pending, on appeal):	
7. Date of Disposition:	
II. Administrative Proceedings	
A. If you are a prisoner, did you file a grievance as required by the prison's administrative remedy procedures?	
YES NO D	
1. If you answered YES:	
a. What was the result? Dismissed under	
Comar 12-02-28	
b. Did you appeal?	
YES ☑ NO □	
2. If you answered NO to either of the questions above, explain why:	
II. Statement of Claim (Briefly state the facts of your case. Include dates, times, and places. Describe what each defendant did or how he/she is involved. If you are making a number of related claims, number and explain each claim in a separate paragraph.)	
Earl of this offices Naglectal to help me on 3/7/20 at apart 7.	-gpm
in MCTC HU#7 for bung assulted by my Cell mate, they stared +	udecked
as he assoulted my & then left me to die for over 15 mas,	
also on the next shift to Officers On the next shift 3/8/20 12:0	
Laughted as I Begged for help my site left broken + I couldn't B Instructions&Form1983 (09/2019) Tohn Doe's on 12-8 pn Suft	reuth
Instructions&Form1983 (09/2019) Inh Doe's on 12 - 8pn Suff	

IV. Relief (State briefly what you want the Court to do for	r you.)
I want for these officers to b	e fined +\$250,000.00 for
I want for these officers to be physical o mental punishment	- + obuse 2 endured
SIGNED THIS 20 day of april	<u>. 2021</u> .
	Signature of Plaintiff  Austin Diven  Printed Name
	MCI-H 1860/ Daxber RD Magerstown MD ZI; Address
	Telephone Number
•	Email Address